

ZB# 01-32-A

Joel & Vicki Hanson

57-1-72

#01-32A - Hanson, Joel & Vicki

Prelim.

August 13, 2001

Applicant called on
6/20/01 - to cancel.

Expired

APPLICATION FEE (DUE AT TIME OF FILING OF APPLICATION)

APPLICANT: Hanson, Joel & Vicki

FILE# _____

RESIDENTIAL: \$50.00

COMMERCIAL: \$150.00

INTERPRETATION: \$150.00

AREA X

USE _____

APPLICATION FOR VARIANCE FEE \$ 50.00

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ESCROW DEPOSIT FOR CONSULTANT FEES \$ 300.00

DISBURSEMENTS:

STENOGRAPHER CHARGES: \$4.50 PER PAGE

PRELIMINARY MEETING-PER PAGE \$ _____

2ND PRELIMINARY- PER PAGE \$ _____

3RD PRELIMINARY- PER PAGE \$ _____

PUBLIC HEARING - PER PAGE \$ _____

PUBLIC HEARING (CONT'D) PER PAGE \$ _____

TOTAL \$ _____

ATTORNEY'S FEES: \$35.00 PER MEEETING

PRELIM. MEETING: \$ _____

2ND PRELIM. \$ _____

3RD PRELIM. \$ _____

PUBLIC HEARING. \$ _____

PUBLIC HEARING (CONT'D) \$ _____

TOTAL \$ _____

MISC. CHARGES:

..... \$ _____

TOTAL \$ _____

LESS ESCROW DEPOSIT \$ _____

(ADDL. CHARGES DUE) \$ _____

REFUND DUE TO APPLICANT .. \$ _____

Pulham.
OFFICE OF THE BUILDING INSPECTOR
TOWN OF NEW WINDSOR
ORANGE COUNTY, NEW YORK

Aug. 13, 2001.

NOTICE OF DISAPPROVAL OF BUILDING PERMIT APPLICATION

**APPLICANT IS TO PLEASE CONTACT THE ZONING BOARD SECRETARY AT (845) 563-4630 TO
MAKE AN APPOINTMENT WITH THE ZONING BOARD OF APPEALS.**

DATE: 5/1/01

APPLICANT: Joel & Vicki Hanson
383 Chestnut Avenue
New Windsor, NY 12553

COPY

PLEASE TAKE NOTICE THAT YOUR APPLICATION DATE: 5/1/01

FOR : 10 x 12 shed

LOCATED AT: 383 Chestnut Avenue

ZONE: R-4 Sec/ Blk/ Lot: 57-1-72

DESCRIPTION OF EXISTING SITE: Single Family

*Applicant to
moved
shed.*

IS DISAPPROVED ON THE FOLLOWING GROUNDS:

1. 48-14A, 1b Accessory Buildings shall be setback 10ft from any lot line, proposed shed will be 4ft
form the rear an side yards.

Thomas Krycheor
BUILDING INSPECTOR

PERMITTED

PROPOSED OR
AVAILABLE:

VARIANCE
REQUEST:

ZONE: R-4 USE: 10 x 12 shed

MIN LOT AREA:

MIN LOT WIDTH:

REQ'D FRONT YD:

REQ'D SIDE YD: 10ft

4ft

6ft

REQ'D TOTAL SIDE TD:

REQ'D REAR YD: 10ft

4ft

6ft

REQ'D FRONTAGE:

MAX BLDG HT:

FLOOR AREA RATIO:

MIN LIVABLE AREA:

DEV COVERAGE:

cc: Z.B.A., APPLICANT, FILE. W/ ATTACHED MAP

PLEASE ALLOW FIVE TO TEN DAYS TO PROCESS
IMPORTANT
YOU MUST CALL FOR ALL REQUIRED INSPECTIONS OF CONSTRUCTION

Other inspections will be made in most cases but those listed below must be made or Certificate of Occupancy may be withheld. Do not mistake an unscheduled inspection for one of those listed below. Unless an inspection report is left on the job indicating approval of one of these inspections it has not been approved and it is improper to continue beyond that point in the work. Any disapproved work must be reinspected after correction.

1. When excavating is complete and footing forms are in place (before pouring.)
2. Foundation inspection. Check here for waterproofing and footing drains.
3. Inspect gravel base under concrete floors and underslab plumbing.
4. When framing, rough plumbing, rough electric and before being covered.
5. Insulation.
6. Final inspection for Certificate of Occupancy. Have on hand electrical inspection data and final certificate of occupancy. Building must be completed at this time. Well water test required and engineer's certification letter for septic system required.
7. Driveway inspection must meet approval of Town Highway Superintendent. A driveway bond may be required.
8. \$50.00 charge for any site that calls for the inspection twice.
9. Call 24 hours in advance, with permit number, to schedule inspection.
10. There will be no inspections unless yellow permit card is posted.
11. Sewer permits must be obtained along with building permits for new houses.
12. Septic permit must be submitted with engineer's drawing and perc test.
13. Road opening permits must be obtained from Town Clerk's office.
14. All building permits will need a Certificate of Occupancy or a Certificate of Compliance and here is no fee for this.

RECEIVED

MAY 01 2001

BUILDING DEPARTMENT

FOR OFFICE USE ONLY:
Building Permit # 2001-359

**AFFIDAVIT OF OWNERSHIP AND/OR CONTRACTOR'S COMP & LIABILITY INSURANCE CERTIFICATE IS
REQUIRED BEFORE PERMIT WILL BE ISSUED**

PLEASE PRINT CLEARLY - FILL OUT ALL INFORMATION WHICH APPLIES TO YOU

Owner of Premises JOEL K. & VICKI L HANSEN

Address 383 Chestnut Ave Phone # 845-497 3157

Mailing Address Same Fax # _____

Name of Architect —

Address _____ Phone _____

Name of Contractor Mr. Shed

Address 520 Blooming Grove Tpk. New Windsor Phone 845-565-7433

State whether applicant is owner, lessee, agent, architect, engineer or builder owner

If applicant is a corporation, signature of duly authorized officer _____
(Name and title of corporate officer)

1. On what street is property located? On the W side of Chestnut Ave
(N, S, E or W)
and 0 feet from the intersection of Chestnut Ave and Vascello Road

2. Zone or use district in which premises are situated _____ Is property a flood zone? Y _____ N X

3. Tax Map Description: Section 57 Block 1 Lot 72

4. State existing use and occupancy of premises and intended use and occupancy of proposed construction.

a. Existing use and occupancy home residence b. Intended use and occupancy Storage shed

5. Nature of work (check if applicable) ☒ New Bldg. ☐ Addition ☐ Alteration ☐ Repair ☐ Removal ☐ Demolition ☐ Other

6. Is this a corner lot? yes

7. Dimensions of entire new construction. Front 10'0" Rear 10'0" Depth 12'0" Height 8'0" No. of stories 1

8. If dwelling, number of dwelling units: _____ Number of dwelling units on each floor _____

Number of bedrooms _____ Baths _____ Toilets _____ Heating Plant: Gas _____ Oil _____
Electric/Hot Air _____ Hot Water _____ If Garage, number of cars _____

9. If business, commercial or mixed occupancy, specify nature and extent of each type of use _____

10. Estimated cost \$2000.00 Fee _____

PAID

50.00
2979 511101

